

## Patient Assistance Program

Akili's Patient Assistance Program is designed to make EndeavorRx<sup>®</sup> more affordable regardless of health insurance status or coverage, or whether caregivers have the means to pay for treatment. Caregivers who are concerned about the out-of-pocket cost for EndeavorRx are encouraged to apply for the Patient Assistance Program to see if they qualify for a reduced prescription cost.

## 2023 Patient Assistance Program Criteria\*

Eligibility for assistance is based on annual income and household size. If eligible, caregivers with a household income up to the amounts shown below can expect to pay the amount shown at the bottom of the column.

Household Size	48 Contiguous States and D.C. (Annual)		
	>200% Poverty Level	200-300% Poverty Level	301-500% Poverty Level
1	\$29,160	\$43,740	\$72,900
2	\$39,440	\$59,160	\$98,600
3	\$49,720	\$74,580	\$124,300
4	\$60,000	\$90,000	\$150,000
5	\$70,280	\$105,420	\$175,700
6	\$80,560	\$120,840	\$201,400
7	\$90,840	\$136,260	\$227,100
8	\$101,120	\$151,680	\$252,800

*For families/households with more than 8 persons, add \$5,140 for each additional person.*

Prescription Cost	\$0	\$49	\$69
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Household Size	Alaska Poverty Guidelines (Annual)		
	>200% Poverty Level	200-300% Poverty Level	301-500% Poverty Level
1	\$36,420	\$54,630	\$91,050
2	\$49,280	\$73,920	\$123,200
3	\$62,140	\$93,210	\$155,350
4	\$75,000	\$112,500	\$187,500
5	\$87,860	\$131,790	\$219,650
6	\$100,720	\$151,080	\$251,800
7	\$113,580	\$170,370	\$283,950
8	\$126,440	\$189,660	\$316,100

*For families/households with more than 8 persons, add \$6,430 for each additional person.*

Prescription Cost	\$0	\$49	\$69
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Household Size	Hawaii Guidelines (Annual)		
	>200% Poverty Level	200-300% Poverty Level	301-500% Poverty Level
1	\$33,540	\$50,310	\$83,850
2	\$45,360	\$68,040	\$113,400
3	\$57,180	\$85,770	\$142,950
4	\$69,000	\$103,500	\$172,500
5	\$80,820	\$121,230	\$202,050
6	\$92,640	\$138,960	\$231,600
7	\$104,460	\$156,690	\$261,150
8	\$116,280	\$174,420	\$290,700

*For families/households with more than 8 persons, add \$5,910 for each additional person.*

Prescription Cost	\$0	\$49	\$69
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## How it Works

- 1 The child's health care provider must first submit a prescription for EndeavorRx to Phil pharmacy.
- 2 Caregivers will then need to complete and submit the Patient Assistance Application by:
  - Going online to [endeavorrx.com/patient-assistance-program](https://endeavorrx.com/patient-assistance-program)
  - OR
  - Printing and sending the form via email to [help@usephil.com](mailto:help@usephil.com) or via fax to 888-975-0603
- 3 Once the application has been processed, a representative from Akili Assist® will reach out to the caregiver to discuss assistance approval and next steps.

**Apply online by scanning the code to visit our website.**

**Questions or need help? Call Akili Assist at 855-977-0975 Option 3 Monday - Friday from 9AM to 9PM Eastern Time.**



The assistance program criteria above are based upon the United States Department of Health & Human Services 2023 Poverty Guidelines, which are subject to change. Application submission does not guarantee enrollment in the program.



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